## EASTERN DISTRICT OF PENNSYLVANIA (In the space above enter the full name(s) of the plaintiff(s).) - against -**COMPLAINT** Jury Trial: ☐ Yes ☐ No (check one) (In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.) I. Parties in this complaint: A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary. Plaintiff Name Street Address County, City State & Zip Code Telephone Number

UNITED STATES DISTRICT COURT

	e served. Make sure that the defendant(s) listed below are identical to those contained in n. Attach additional sheets of paper as necessary.
Defendant No. 1	Name
	Street Address
	County, City
	State & Zip Code
Defendant No. 2	Name
	Street Address
	County, City
	State & Zip Code
Defendant No. 3	Name
	Street Address
	County, City
	State & Zip Code
Defendant No. 4	Name
	Street Address
	County, City
	State & Zip Code
II. Basis for Jurisd	iction:
involving a federal questicase involving the United	of limited jurisdiction. Only two types of cases can be heard in federal court: cases on and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. citizen of one state sues a citizen of another state and the amount in damages is more than citizenship case.
	s for federal court jurisdiction? (check all that apply)
☐ Federal Que	estions $\square$ Diversity of Citizenship
-	risdiction is Federal Question, what federal Constitutional, statutory or treaty right is at

List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each

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В.

C.	If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?
	Plaintiff(s) state(s) of citizenship
	Defendant(s) state(s) of citizenship
III.	Statement of Claim:
compl includ cite an	as briefly as possible the <u>facts</u> of your case. Describe how <u>each</u> of the defendants named in the caption of this aint is involved in this action, along with the dates and locations of all relevant events. You may wish to e further details such as the names of other persons involved in the events giving rise to your claims. Do not by cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a te paragraph. Attach additional sheets of paper as necessary.
A.	Where did the events giving rise to your claim(s) occur?
В.	What date and approximate time did the events giving rise to your claim(s) occur?
C.	Facts:

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#### IV. Injuries:

VOII r	sustained injuries related to the events alleged above, describe them and state what medical treatment, if any,
you I	equired and received
V.	Relief:
State	what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and
	what you want the court to do for you and the amount of monetary compensation, it any, you are seening, and
the ba	oi- for only company time
	asis for such compensation.

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I declare	under penalty of perjury t	that the foregoing is true and correct.
Signed thi	is day of	, 20
		Signature of Plaintiff
		Mailing Address
		Telephone Number
		Fax Number (if you have one)
		E-mail Address
	-	aption of the complaint must date and sign the complaint. Prisoners must also s, present place of confinement, and address.
For Prison	ners:	
this compl		t on this day of, 20, I am delivering be mailed to the Clerk's Office of the United States District Court for the
		Signature of Plaintiff:
		Inmate Number

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### United States District Court

for the

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Hactern	I lightrich	of Penney	lvania
Lastern	District	of Pennsy	i v aiiia

Plaintiff/Petitioner v.	) ) )	Civil Action No.
	)	

## APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

Affidavit in Support of the Application	Instructions
I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.	Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.
Signed:	Date:

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the <u>monthly</u> rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	\$	\$	\$	\$
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$

Retirement (such as social security, pensions, annuities, insurance)	\$ \$	\$ \$
Disability (such as social security, insurance payments)	\$ \$	\$ \$
Unemployment payments	\$ \$	\$ \$
Public-assistance (such as welfare)	\$ \$	\$ \$
Other (specify):	\$ \$	\$ \$
Total monthly income:	\$ \$	\$ \$

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
			\$
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
			\$
			\$
			\$

4.	How much cash do you and your spouse have? \$
	Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
		\$	\$
		\$	\$
		\$	\$

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5.	List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary
	household furnishings.

Assets owned by you or your spouse			
Home (Value)	\$		
Other real estate (Value)	\$		
Motor vehicle #1 (Value)	\$		
Make and year:			
Model:			
Motor vehicle #2 (Value)	\$		
Make and year:			
Model:			
Other assets (Value)	\$		
Other assets (Value)	\$		

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to you	r spouse
	\$	\$	
	\$	<b>.</b>	
	\$	\$	

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home)  Are real estate taxes included?   Yes   No  Is property insurance included?   Yes   No	\$	\$
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$
Home maintenance (repairs and upkeep)	\$	\$
Food	\$	\$
Clothing	\$	\$
Laundry and dry-cleaning	\$	\$
Medical and dental expenses	\$	\$
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortgage payments)		·
Homeowner's or renter's:	\$	\$
Life:	\$	\$
Health:	\$	\$
Motor vehicle:	\$	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	\$
Installment payments		
Motor vehicle:	\$	\$
Credit card (name):	\$	\$
Department store (name):	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$	\$

Regula statemen	ar expenses for operation of business, profession, or farm (attach detailed nt)	\$	\$	
Other	(specify):	\$	\$	
	Total monthly expenses:	\$	\$	
9.	Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?			
	☐ Yes ☐ No If yes, describe on an attached sheet.			
10.	Have you paid — or will you be paying — an attorney any money for se including the completion of this form? ☐ Yes ☐ No	rvices in connection v	vith this case,	
	If yes, how much? \$			
11.	Have you paid — or will you be paying — anyone other than an attorney for services in connection with this case, including the completion of this If yes, how much? \$		typist) any money  No	
12.	Provide any other information that will help explain why you cannot pay	the costs of these pro	oceedings.	
13.	Identify the city and state of your legal residence.			
	Your daytime phone number:			
	Your age: Your years of schooling:			
	Last four digits of your social-security number:			

#### UNITED STATES DISTRICT COURT

FOR THE EASTERN DISTRICT OF PENNSYLVANIA — DESIGNATION FORM to be used by counsel to indicate the category of the case for the purpose of assignment to appropriate calendar.

assignment to appropriate calendar.	
Address of Plaintiff:	
Address of Defendant:	
Place of Accident, Incident or Transaction:	
(Use Reverse Side For Additional Space)	
Does this civil action involve a nongovernmental corporate party with any parent corporation	and any publicly held corporation owning 10% or more of its stock?
(Attach two copies of the Disclosure Statement Form in accordance with Fed.R.Civ.P. 7.1(a	a)) Yes□ No□
Does this case involve multidistrict litigation possibilities?  RELATED CASE, IF ANY:	Yes□ No□
Case Number: Judge	Date Terminated:
Civil cases are deemed related when yes is answered to any of the following questions:	
1. Is this case related to property included in an earlier numbered suit pending or within one	year previously terminated action in this court?
2. Does this case involve the same issue of fact or grow out of the same transaction as a prior	Yes No
2. Does this case involve the same issue of fact or grow out of the same transaction as a prior action in this court?	r suit pending or within one year previously terminated
	Yes□ No□
3. Does this case involve the validity or infringement of a patent already in suit or any earlier	
terminated action in this court?	Yes□ No□
4. Is this case a second or successive habeas corpus, social security appeal, or pro se civil rig	hts case filed by the same individual?
	Yes□ No□
CIVIL: (Place ✓ in ONE CATEGORY ONLY)	
	D. D. V. L. P. C.
A. Federal Question Cases:	B. Diversity Jurisdiction Cases:  1. □ Insurance Contract and Other Contracts
1.   Indemnity Contract, Marine Contract, and All Other Contracts	
2. □ FELA	2. Airplane Personal Injury
3.   Jones Act-Personal Injury	3.   Assault, Defamation
4.  Antitrust	4.   Marine Personal Injury
5. Patent	5.  Motor Vehicle Personal Injury
6. □ Labor-Management Relations	6. □ Other Personal Injury (Please specify)
7. □ Civil Rights	7. □ Products Liability
8. □ Habeas Corpus	8. □ Products Liability — Asbestos
9. □ Securities Act(s) Cases	9. □ All other Diversity Cases
10. □ Social Security Review Cases	(Please specify)
<ul><li>11. □ All other Federal Question Cases</li><li>(Please specify)</li></ul>	
ARBITRATION CER' (Check Appropriate C	
I, , counsel of record do hereby cert	
□ Pursuant to Local Civil Rule 53.2, Section 3(c)(2), that to the best of my knowledge and	d belief, the damages recoverable in this civil action case exceed the sum of
\$150,000.00 exclusive of interest and costs;	
□ Relief other than monetary damages is sought.	
DATE:	
Attorney-at-Law	Attorney I.D.#
<b>NOTE:</b> A trial de novo will be a trial by jury only if the	here has been compliance with F.R.C.P. 38.
I certify that, to my knowledge, the within case is not related to any case now pending o except as noted above.	r within one year previously terminated action in this court
DATE:	
Attorney-at-Law	Attorney I.D.#

CIV. 609 (6/08)

## IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

#### **CASE MANAGEMENT TRACK DESIGNATION FORM**

٧.

**CIVIL ACTION** 

	NO.		
plaintiff shall complete a C filing the complaint and serverse side of this form.) said designation, that defe serve on the plaintiff and a	il Justice Expense and Delay Reduction Plan of this coase Management Track Designation Form in all civil carve a copy on all defendants. (See § 1:03 of the plans In the event that a defendant does not agree with the Indant shall, with its first appearance, submit to the cleil other parties, a Case Management Track Designation and and believes the case should be assigned.	ases set fo plain k of	at the time of orth on the tiff regarding court and
SELECT ONE OF THE FO	DLLOWING CASE MANAGEMENT TRACKS:		
(a)	Habeas Corpus – Cases brought under 28 U.S.C. § 2241 through § 2255.	(	)
(b)	Social Security – Cases requesting review of a decision of the Secretary of Health and Human Services denying plaintiff Social Security Benefits.	(	)
(c)	Arbitration – Cases required to be designated fo arbitration under Local Civil Rule 53.2.	(	)
(d)	Asbestos – Cases involving claims for personal injury or property damage from exposure to asbestos.	(	)
(e)	Special Management – Cases that do not fall into tracks (a) through (d) that are commonly referred to as complex and that need special or intense management by the court. (See reverse side of this form for a detailed explanation of special management cases.)	(	)
(f)	Standard Management – Cases that do not fall into any one of the other tracks.	(	)
Date	Printed Name of Pro Se Plaint	iff	<u></u>
	Signature of Pro Se Plaintiff		

## **Civil Justice Expense and Delay Reduction Plan Section 1:03 - Assignment to a Management Track**

- (a) The clerk of court will assign cases to tracks (a) through (d) based on the initial pleading.
- (b) In all cases not appropriate for assignment by the clerk of court to tracks (a) through (d), the plaintiff shall submit to the clerk of court and serve with the complaint on all defendants a case management track designation form specifying that the plaintiff believes the case requires Standard Management or Special Management. In the event that a defendant does not agree with the plaintiff regarding said designation, that defendant shall, with its first appearance, submit to the clerk of court and serve on the plaintiff and all other parties, a case management track designation form specifying the track to which that defendant believes the case should be assigned.
- (c) The court may, on its own initiative or upon the request of any party, change the track assignment of any case at any time.
- (d) Nothing in this Plan is intended to abrogate or limit a judicial officer's authority in any case pending before that judicial officer, to direct pretrial and trial proceedings that are more stringent than those of the Plan and that are designed to accomplish cost and delay reduction.
- (e) Nothing in this Plan is intended to supersede Local Civil Rules 40.1 and 72.1, or the procedure for random assignment of Habeas Corpus and Social Security cases referred to magistrate judges of the court.

# SPECIAL MANAGEMENT CASE ASSIGNMENTS (See §1.02 (e) Management Track Definitions of the Civil Justice Expense and Delay Reduction Plan)

Special Management cases will usually include that class of cases commonly referred to as "complex litigation" as that term has been used in the Manuals for Complex Litigation. The first manual was prepared in 1969 and the Manual for Complex Litigation Second, MCL 2d was prepared in 1985. This term is intended to include cases that present unusual problems and require extraordinary treatment. See §0.1 of the first manual. Cases may require special or intense management by the court due to one or more of the following factors: (1) large number of parties; (2) large number of claims or defenses; (3) complex factual issues; (4) large volume of evidence; (5) problems locating or preserving evidence; (6) extensive discovery; (7) exceptionally long time needed to prepare for disposition; (8) decision needed within an exceptionally short time; and (9) need to decide preliminary issues before final disposition. It may include two or more related cases. Complex litigation typically includes such cases as antitrust cases; cases involving a large number of parties or an unincorporated association of large membership; cases involving requests for injunctive relief affecting the operation of large business entities; patent cases; copyright and trademark cases; common disaster cases such as those arising from aircraft crashes or marine disasters; actions brought by individual stockholders; stockholder's derivative and stockholder's representative actions; class actions or potential class actions; and other civil (and criminal) cases involving unusual multiplicity or complexity of factual issues. See §0.22 of the first Manual for Complex Litigation and Manual for Complex Litigation Second, Chapter 33.